Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main

		17(7(7))	1 131 13.7.7	
Fill in this inform	mation to identify your	case:		
Debtor 1	Joshua L. Suther	land		
	First Name	Middle Name	Last Name	
Debtor 2	Sarah M. Sutherla	and		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number	19-22799			
(if known)				☐ Check if this is an amended filing
				3

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	339,960.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	56,884.6
	1c. Copy line 63, Total of all property on Schedule A/B	\$	396,844.6
Par	12: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	322,128.86
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	184,354.5
	Your total liabilities	\$	506,483.44
⊃ar	3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,371.43
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,376.00
Par	4: Answer These Questions for Administrative and Statistical Records		
S.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 2 of 55

Debtor 1 Joshua L. Sutherland
Debtor 2 Sarah M. Sutherland

Case number (if known) 19-22799

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,524.30

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	137,459.59
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	137,459.59

						from Part 1, including a			\$339,960.00
				prop	er information perty identificat	you wish to add about this i		ocal	
	County					d Debtor 2 only of the debtors and another		k if this is com	munity property
	Allegheny								
				Who	•	st in the property? Check one y		te), if known. by the Ent	ireties
					Timeshare Other		_ (such as f	ee simple, ten	our ownership interest ancy by the entireties, or
	City	State	ZIP Code		Investment p	property	· · · · · · · · · · · · · · · · · · ·	39,960.00	\$339,960.00
	Clairton	PA	15025-0000			a or mobile home	Current va		Current value of the portion you own?
]	d or mobile home			
	Oneon address, if al	anabie, or other des	onplion		. Condominiur	ulti-unit building m or cooperative			ns Secured by Property.
	412 Labrado Street address, if av		cription		Single-family				aims or exemptions. Put d claims on Schedule D:
1.1				Wha	t is the proper	ty? Check all that apply			
-	Yes. Where is th	e property?							
	No. Go to Part 2.								
ı. Do	you own or have	e any legal or eq	uitable interest in a	any resid	dence, building	g, land, or similar property?			
Part	1: Describe Eac	ch Residence, B	uilding, Land, or O	ther Rea	l Estate You O	wn or Have an Interest In			
nfor		pace is needed,				he top of any additional pag			
n ea	ch category, sepa	arately list and d	escribe items. List			an asset fits in more than o			
_	hedule		_						12/15
Off	ficial Forn	n 106A/E	3						
Cas	e number 19-	22799				_			☐ Check if this is an amended filing
Unit	ed States Bankr	uptcy Court for	the: WESTERN	N DISTR	RICT OF PEN	NSYLVANIA			
(Spot	use, if filing)	First Name		e Name		Last Name			
Deb	otor 2	First Name Sarah M. Su		e Name		Last Name			
	tor 1	Joshua L. S			<u> </u>				
	in this informat	ion to identify	your case and the	nis filin	g:				
					cument	Page 3 of 55		1	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Page 4 of 55 Document Joshua L. Sutherland Debtor 1 19-22799 Sarah M. Sutherland Debtor 2 Case number (if known) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... 2 refrigerators, 1 microwave, 1 stove, 4 couches, lawn equipment, 1 piece of outdoor furniture, 1 washer, 1 dryer, 1 dining room set, 1 \$7,025.00 table, 4 beds, 3 dressers, 4 night stands and 2 desks 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$1,245.00 1 DVD player, 1 music player, 4 computers and 1 television 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$1,350.00 Regular clothing items

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

Debto Debto		loshua L. Sutherla Sarah M. Sutherlan		Case number (if known)	19-22799
		Wedo	ling bands		\$4,841.75
E. ■	<i>xamples</i> No	animals s: Dogs, cats, birds, ho	orses		
	No	personal and house	-	not already list, including any health aids you did not list	
				art 3, including any entries for pages you have attached	\$14,461.75
Part 4:	Descr	ibe Your Financial Asse	ets		
Do yo	ou own	or have any legal or	equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	xamples No	s: Money you have in y		me, in a safe deposit box, and on hand when you file your petit	on
	xamples No			unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each. Institution name:	houses, and other similar
		17.1.	Credit Union	Eastman Credit Union primary share account ending in *4447	\$1,104.30
		17.2.	Checking	First Commonwealth Account ending in *0871	\$838.70
		17.3.	Checking	PNC Bank account ending in *9582	\$435.05
		17.4.	Credit Union	Eastman Credit Union secondary share account ending in *4455	\$5.00
		17.5.	Checking	PNC Bank reserve account ending in *8248	\$100.00
		17.6.	Checking	PNC Bank growth account ending in *6275	\$101.81
	xamples	utual funds, or publi a: Bond funds, investm		kerage firms, money market accounts	
	Yes		Institution or issuer r	name:	
	int ven		l interests in incorpo	orated and unincorporated businesses, including an interes	st in an LLC, partnership, and

Official Form 106A/B Schedule A/B: Property

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Page 6 of 55 Document Joshua L. Sutherland Debtor 1 19-22799 Debtor 2 Sarah M. Sutherland Case number (if known) ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **GE RSP retirement plan** \$3,828.65 401(k) Eastman investment plan \$27,386.31 401(k) **Jefferson Regional Medical Center** \$8.623.04 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the

portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 4

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 7 of 55 Joshua L. Sutherland Debtor 1 19-22799 Sarah M. Sutherland Debtor 2 Case number (if known) 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: Term life insurance policy provided by \$0.00 **Employer** Term life insurance policy provided by \$0.00 **Employer** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$42,422,86 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Official Form 106A/B

Yes. Go to line 47.

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 8 of 55

Joshua L. Sutherland Debtor 1 Case number (if known) 19-22799 Sarah M. Sutherland Debtor 2 Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$339,960.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$14,461.75 Part 4: Total financial assets, line 36 \$42,422.86 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$56,884.61 Copy personal property total \$56,884.61

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$396,844.61

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 9 of 55

Fill in this infor	mation to identify your	case:		
Debtor 1	Joshua L. Suther	land		
	First Name	Middle Name	Last Name	
Debtor 2	Sarah M. Sutherla	and		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	DF PENNSYLVANIA	
Case number	19-22799			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	You Claim as	Exempt

C	identity the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.					
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	412 Labrador Lane Clairton, PA 15025 Allegheny County	\$339,960.00	•	\$17,831.14	11 U.S.C. § 522(d)(1)				
	Market value based on the 2017 purchase price Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2 refrigerators, 1 microwave, 1 stove, 4 couches, lawn equipment, 1 piece	\$7,025.00		\$7,025.00	11 U.S.C. § 522(d)(3)				
	of outdoor furniture, 1 washer, 1 dryer, 1 dining room set, 1 table, 4 beds, 3 dressers, 4 night stands and 2 desks Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	1 DVD player, 1 music player, 4 computers and 1 television	\$1,245.00		\$1,245.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Regular clothing items Line from Schedule A/B: 11.1	\$1,350.00		\$1,350.00	11 U.S.C. § 522(d)(3)				
L	End nom <i>Solidate PAB</i> . 1111			100% of fair market value, up to any applicable statutory limit					

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Mair Document Page 10 of 55

Joshua L. Sutherland Debtor 1 19-22799 Sarah M. Sutherland Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding bands 11 U.S.C. § 522(d)(4) \$4,841.75 \$3,400.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Wedding bands 11 U.S.C. § 522(d)(5) \$4,841.75 \$1,441.75 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Credit Union: Eastman Credit Union** 11 U.S.C. § 522(d)(5) \$1.104.30 \$1,104.30 primary share account ending in *4447 п 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit **Checking: First Commonwealth** 11 U.S.C. § 522(d)(5) \$838.70 \$838.70 Account ending in *0871 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Checking: PNC Bank account ending** 11 U.S.C. § 522(d)(5) \$435.05 \$435.05 in *9582 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Credit Union: Eastman Credit Union 11 U.S.C. § 522(d)(5) \$5.00 secondary share account ending in *4455 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17.4 Checking: PNC Bank reserve 11 U.S.C. § 522(d)(5) \$100.00 \$100.00 account ending in *8248 Line from Schedule A/B: 17.5 100% of fair market value, up to any applicable statutory limit Checking: PNC Bank growth account 11 U.S.C. § 522(d)(5) \$101.81 \$101.81 ending in *6275 Line from Schedule A/B: 17.6 100% of fair market value, up to any applicable statutory limit 401(k): GE RSP retirement plan 11 U.S.C. § 522(d)(12) \$3,828.65 \$3,828.65 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401(k): Eastman investment plan 11 U.S.C. § 522(d)(12) \$27,386.31 \$27,386.31 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 401(k): Jefferson Regional Medical 11 U.S.C. § 522(d)(12) \$8,623.04 \$8,623.04 Center Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 11 of 55

Debtor 1 Joshua L. Sutherland

Debto	Sarah M. Sutherland		Case number (if known)	19-22799		
	rief description of the property and line on chedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
		Copy the value from Check only one box for each exemption. Schedule A/B				
	erm life insurance policy provided y Employer	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)	
	ine from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
	erm life insurance policy provided y Employer	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)	
	ine from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit		
	Tre you claiming a homestead exemption Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property covere No Yes	3 years after that for ca	ases fi	ŕ	,	

Case 19-22/99-C	MB D0c 16 Filed 08/08/19 Ente Document Page 12	erea 08/08/19 of 55	13:52:08 Des	sc Main
Fill in this information to identify				
Debtor 1 Joshua L. S				
Debtor 2 (Spouse if, filing) First Name Sarah M. Sur First Name	Middle Name Last Name therland Middle Name Last Name		-	
United States Bankruptcy Court for	the: WESTERN DISTRICT OF PENNSYLVANIA			
Case number 19-22799			-	
(if known)			_	if this is an led filing
<u>Official Form 106D</u> Schedule D: Credito	ors Who Have Claims Secured	by Propert	у	12/15
I. Do any creditors have claims secure ☐ No. Check this box and subn ☐ Yes. Fill in all of the informat Part 1: List All Secured Claims	mit this form to the court with your other schedules. You tion below.	u have nothing else	to report on this form.	
	has more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one credito	r has a particular claim, list the other creditors in Part 2. As abetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Cenlar	Describe the property that secures the claim:	\$313,268.71	\$339,960.00	\$0.00
PO Box 77404 Ewing, NJ 08628	412 Labrador Lane Clairton, PA 15025 Allegheny County Market value based on the 2017 purchase price As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or secucar loan)	red		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			

First Mortgage

7112

☐ Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number

 $\hfill \square$ At least one of the debtors and another

 $\hfill\square$ Check if this claim relates to a

Date debt was incurred 02/28/17

community debt

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 13 of 55

Debtor	1 Joshua L. Sutherland		Ca	se number (if known)	19-22799	
	First Name Middle Na	ame Last Name				
Debtor	72 Sarah M. Sutherland First Name Middle Na	ame Last Name	_			
ククー	efferson Hills School District & Boroug	Describe the property that secures	the claim:	\$8,860.15	\$339,960.00	\$0.00
J	osephine Lipnicky, Tax	412 Labrador Lane Clairton, 15025 Allegheny County Market value based on the 2 purchase price				
P	Collector PO Box 826 Clairton, PA 15025	As of the date you file, the claim is: apply. Contingent	Check all that			
	umber, Street, City, State & Zip Code wes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.				
_	tor 1 only tor 2 only	☐ An agreement you made (such as car loan)	mortgage or secu	red		
_	tor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit	chanic's lien)			
☐ Che	ck if this claim relates to a nmunity debt	Other (including a right to offset)	Tax Lien			
Date de	ebt was incurred 2016 & 2017	Last 4 digits of account num	ber <u>5249</u>			
		olumn A on this page. Write that num		\$322,128		
	that number here:	inc donar varde totals from all pages.		\$322,128	3.86	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-22/99-CMB Doc 16	5 Filed 08/08/19 Entered 08/08/19 13:52 Document Page 14 of 55	2:08 Desc Main
Fill in this information to identify your case:	Ducument Pade 14 01 55	
Debtor 1 Joshua L. Sutherland First Name Middle	Name Last Name	
Debtor 2 Sarah M. Sutherland		
(Spouse if, filing) First Name Middle	Name Last Name	
United States Bankruptcy Court for the: WESTER	N DISTRICT OF PENNSYLVANIA	
Case number 19-22799		
(if known)		Check if this is an amended filing
Official Form 106E/F		
Schedule E/F: Creditors Who Have	e Unsecured Claims	12/15
Schedule G: Executory Contracts and Unexpired Leases (Schedule D: Creditors Who Have Claims Secured by Prop	sult in a claim. Also list executory contracts on Schedule A/B: Prope Official Form 106G). Do not include any creditors with partially secur erty. If more space is needed, copy the Part you need, fill it out, numl e no information to report in a Part, do not file that Part. On the top of	red claims that are listed in ber the entries in the boxes on the
Do any creditors have priority unsecured claims aga		
■ No. Go to Part 2.		
☐ Yes.		
ies.		
Part 2: List All of Your NONPRIORITY Unsecure	ed Claims	
3. Do any creditors have nonpriority unsecured claims	against you?	
\square No. You have nothing to report in this part. Submit this	s form to the court with your other schedules.	
■ Yes.		
List all of your nonpriority unsecured claims in the a unsecured claim, list the creditor separately for each clai	Iphabetical order of the creditor who holds each claim. If a creditor ham. For each claim listed, identify what type of claim it is. Do not list claims reditors in Part 3.If you have more than three nonpriority unsecured claims	already included in Part 1. If more
		Total claim
Advanced Dermatology & Cosmetic Surgery	Last 4 digits of account number 2829	\$350.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 864046 Orlando, FL 32886-4046	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that yo report as priority claims	ou did not
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		
□ 162	Other. Specify Medical	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 15 of 55

Debto	r 2 Sarah M. Sutherland		Case number (if known)	19-22799			
4.2	Americredit/GM Financial	Last 4 digits of account number	7085		\$870.00		
	Nonpriority Creditor's Name PO Box 181145	When was the debt incurred?	04/02/15				
	Arlington, TX 76096 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	•					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce	that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	☐ Yes	Other. Specify Auto Lease	· · · · · · · · · · · · · · · · · · ·				
4.3	Capital One	Last 4 digits of account number	9786		\$3,417.00		
	Nonpriority Creditor's Name P.O. Box 30281 Salt Lake City, UT 84130-0281	When was the debt incurred?	10/09/04				
	Number Street City State Zip Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.	rred the debt? Check one.					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce	that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	☐ Yes	Other. Specify Necessary	expenses				
4.4	CB/Jared	Last 4 digits of account number	8850		\$485.00		
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred?	09/04/17				
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim i	s: Chook all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim i	S. Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	_ `					
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	☐ Yes	Other Specify Consumer					
	55	- Other. Specify					

Debte	or 2 Sarah M. Sutherland	Case number (if known) 19-22799	
4.5	CBCS	Last 4 digits of account number 3360	\$878.09
	Nonpriority Creditor's Name PO Box 2724	When was the debt incurred?	
	Columbus, OH 43216-2724 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.6	CBCS	Last 4 digits of account number 9357	\$1,170.03
	Nonpriority Creditor's Name PO Box 2724	When was the debt incurred?	
	Columbus, OH 43216-2724	As of the date was file the alring in O. 1. 1111.	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	П	
	Debtor 2 only	Contingent	
	_	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.7	Colleen Daniels	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Aegis Realty Partners, Inc. 1301 Grandview Ave.	When was the debt incurred?	
	Trimont Plaza, Suite 1136 Pittsburgh, PA 15211 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Past-due rent	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 17 of 55

Debtor Debtor	1 Joshua L. Sutherland 2 Sarah M. Sutherland	Case number (if known) 19-22799		
4.8	Commercial Acceptance Co.	Last 4 digits of account number DDJC	\$337.80	
	Nonpriority Creditor's Name 2300 Gettysburg Road Suite 102	When was the debt incurred?		
	Camp Hill, PA 17011	_		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Collections		
4.9	Dept of Ed / NELNET Nonpriority Creditor's Name	Last 4 digits of account number 0000	\$39,728.00	
	3015 Parker Road	When was the debt incurred? 01/07/10		
	Suite 400			
	Aurora, CO 80014 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply		
	☐ Debtor 1 only ☐ Contingent			
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	\square Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	Other. Specify		
		Educational		
4.1 0	Dept of Ed / NELNET Nonpriority Creditor's Name	Last 4 digits of account number 0000	\$8,288.00	
	3015 Parker Road Suite 400	When was the debt incurred? 01/30/13		
	Aurora, CO 80014	_		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	По		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a community debt			
	debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	☐ Other. Specify		
		Educational		

Debt	or 2 Sarah M. Sutherland	Case number (if known) 19-22/99					
4.1 1	Dept of Ed / NELNET Nonpriority Creditor's Name	Last 4 digits of account number 0000	\$7,060.00				
	3015 Parker Road Suite 400 Aurora, CO 80014	When was the debt incurred? 09/23/13					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
		Educational					
4.1 2	Dept of Ed / NELNET	Last 4 digits of account number 0000	\$5,007.00				
	Nonpriority Creditor's Name 3015 Parker Road Suite 400	When was the debt incurred? 09/23/13					
	Aurora, CO 80014	- Acceptate that a first state to be a second					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	□ Debtor 2 only □ Unliquidated						
		□ Disputed					
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	■ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	☐ Other. Specify					
	33	Educational					
4.1 3	Dept of Ed / NELNET	Last 4 digits of account number 0000	\$4,822.00				
	Nonpriority Creditor's Name 3015 Parker Road Suite 400	When was the debt incurred? 01/07/10					
	Aurora, CO 80014	_					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	Поли					
	☐ Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
At least one of the debtors and another		Student loans					
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	☐ Other. Specify					
		Educational					

Debto	Sarah M. Sutherland		Case number (if known)	19-22799	
4.1 4	Dept of Ed / NELNET	Last 4 digits of account number	0000		\$3,838.00
	Nonpriority Creditor's Name 3015 Parker Road Suite 400	When was the debt incurred?	01/30/13		
	Aurora, CO 80014 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	<u> </u>	Type of NONPRIORITY unsecured	d claim:		
	☐ At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	☐ Yes	Other. Specify			
	L les	Educationa	ı		
4.1 5	Discover Financial Services	Last 4 digits of account number	8249		\$21,795.00
	Nonpriority Creditor's Name PO Box 15316 Wilmington, DE 19850	When was the debt incurred?	07/20/12		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	· ·	,	
	No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	Yes	Other. Specify Necessary	expenses		
4.1 6	Jefferson Cardiology	Last 4 digits of account number	0264		\$337.80
	Nonpriority Creditor's Name 1633 Route 51, Suite 103 Clairton, PA 15025-3666	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset? —	Obligations arising out of a sepa report as priority claims	J	,	
	No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Medical			

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 20 of 55

Debt	Sarah M. Sutherland	Case number (if known) 19-22799	
4.1	MedFinancial	Last 4 digits of account number 9072	\$777.56
7	Nonpriority Creditor's Name 1 1st Tennessee Bank Dept. #888183	When was the debt incurred?	Ψιτιου
	Knoxville, TN 37995-8183 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1 8	Simm Associates, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 7551	\$227.30
	800 Pencader Drive Newark, DE 19702	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1 9	State Collection Service	Last 4 digits of account number 2740	\$541.04
	Nonpriority Creditor's Name 2509 S. Stoughton Road Madison, WI 53716	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 21 of 55

Debtor 1 Joshua L. Sutherland

Debt	or 2 Sarah M. Sutherland	Case number (if known) 19-22799	
4.2 0	Syncb/Mc	Last 4 digits of account number 4363	\$7,249.00
<u> </u>	Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896	When was the debt incurred? 11/17/13	<u> </u>
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Necessary expenses	
4.2 1	SynchronyMC/SYNCB	Last 4 digits of account number 5547	\$7,249.34
	Nonpriority Creditor's Name PO Box 530939 Atlanta, GA 30353-0939	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Necessary expenses	
4.2	UPMC	Last 4 digits of account number 1003	\$1,210.03
	Nonpriority Creditor's Name 2 Hot Metal Street	When was the debt incurred? 01000740254802	·,
	Dist. Room 386 Pittsburgh, PA 15203		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Continued.	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	· · · ·	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	<u> </u>	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify Medical	
	* *	— Galor. Opcory	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 22 of 55

Debtor 2	Sarah M.	Sutherland		Case n	umber (if known)	19-22799	
4.2	US Departn	nent of Education	Last 4 digits of account number	8206	;		\$68,716.59
<u> </u>	Nonpriority Cred PO Box 740	ditor's Name 1283	When was the debt incurred?				400,110100
		. 30374-0283 City State Zip Code	As of the date you file, the claim	is: Checl	k all that apply		
		the debt? Check one.	, o a , o , o		it all triat apply		
1	Debtor 1 on	ly	☐ Contingent				
1	Debtor 2 on	V	☐ Unliquidated				
ĺ	■ Debtor 1 and	d Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	_		Student loans				
•	debt	s claim is for a community bject to offset?	☐ Obligations arising out of a sep	aration aç	greement or divorce	that you did not	
	■ No	,	Debts to pension or profit-shari	ing plans,	and other similar de	bts	
	☐ Yes		Other. Specify				
			Education	al			
Part 3:	List Others	s to Be Notified About a Deb	t That You Already Listed				
is trying	g to collect fro	m you for a debt you owe to son	out your bankruptcy, for a debt that neone else, list the original creditor i you listed in Parts 1 or 2, list the add submit this page.	n Parts 1	or 2, then list the o	ollection agency he	re. Similarly, if you
	d Address		On which entry in Part 1 or Part 2 did yo		-		
Capital	one ox 71083	L				ty Unsecured Claims	
	tte, NC 2827		ast 4 digits of account number	■ Part 2:	Creditors with Nonp	riority Unsecured Clai	ms
Name and	d Address er		On which entry in Part 1 or Part 2 did yo ine 4.15 of (<i>Check one</i>):		•	ty Unsecured Claims	
PO Box			ı	Part 2:	Creditors with Nonp	riority Unsecured Clai	ms
New Al	lbany, OH 4		ast 4 digits of account number				
Part 4:	Add the A	mounts for Each Type of Uns	secured Claim				
6. Total th	ne amounts of	certain types of unsecured clain	ns. This information is for statistical	reporting	purposes only. 28	U.S.C. §159. Add the	e amounts for each
type of	unsecured cla	um.			Total	Olai	
	6a.	Domestic support obligations		6a.	Total	0.00	
Total		Jan				0.00	
claims from Part	t 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.		njury while you were intoxicated	6c.	\$ 	0.00	
	6d.	· ·	cured claims. Write that amount here.	6d.	\$	0.00	
					-		٦
	6e.	Total Priority. Add lines 6a throu	ugh 6d.	6e.	\$	0.00	
					Total		
Total	6f.	Student loans		6f.	\$	137,459.59	
claims from Part	t 2 6g.	Obligations arising out of a se	paration agreement or divorce that	-		0.00	
		you did not report as priority of	laims	6g. 6h	\$	0.00	
	6h. 6i.	= = = = = = = = = = = = = = = = = = = =	ring plans, and other similar debts insecured claims. Write that amount	6h. 6i.	Ф	0.00	
	OI.	here.	moodared ciamic. Write that amount	Ji.	\$	46,894.99	_
	6i.	Total Nonpriority. Add lines 6f t	hrough 6i	6i.	\$	184 354 58	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main

		12111111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Joshua L. Suther	land		
	First Name	Middle Name	Last Name	
Debtor 2	Sarah M. Sutherla	and		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	PENNSYLVANIA	
_	19-22799			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for	
2.1	Ford Motor Credit P.O. Box 54200 Omaha, NE 68154	2018 Ford Explorer	
2.2	Nissan Infiniti LT PO Box 660366 Dallas, TX 75266-0366	2017 Nissan Titan	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main

		Documen	t Page 24 of	5 55
Fill in this	information to identify your ca	se:		
Debtor 1	Joshua L. Sutherla	nd		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filin	Sarah M. Sutherlan First Name	Middle Name	Last Name	
	9)			
United Stat	tes Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA	
Case numb	per 19-22799			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106H			
	ule H: Your Code	htore		40/45
Scried	ule n. Toul Code	DIOIS		12/15
our name	and case number (if known). A you have any codebtors? (If yo	Answer every question.	· ·	this page. On the top of any Additional Pages, write as a codebtor.
-				
■ No □ Yes				
□ res				
	nin the last 8 years, have you li a, California, Idaho, Louisiana, N			? (Community property states and territories include gton, and Wisconsin.)
	Go to line 3.			
⊔ Yes	. Did your spouse, former spouse	e, or legal equivalent live v	vith you at the time?	
in line Form	2 again as a codebtor only if t	hat person is a guaranto	r or cosigner. Make sı	f your spouse is filing with you. List the person show ure you have listed the creditor on Schedule D (Officia G). Use Schedule D, Schedule E/F, or Schedule G to f
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP 0	Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			-
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			-
	City	State	ZIP Code	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 25 of 55

Fill	in this information to ident	ify your case:		
Del	btor 1 Josh	nua L. Sutherland		
	btor 2 Sara	h M. Sutherland	_	
Uni	ited States Bankruptcy Co	urt for the: WESTERN DISTRIC	T OF PENNSYLVANIA	
Cas	se number 19-22799)	Cr	neck if this is:
(If kr	nown)			An amended filing A supplement showing postpetition chapter 13 income as of the following date:
0	fficial Form 106	<u>81</u>		MM / DD/ YYYY
S	chedule I: You	r Income		12/15
spo	use. If you are separated	l and your spouse is not filing w is form. On the top of any addit	vith you, do not include information ab	ith you, include information about your out your spouse. If more space is needed, number (if known). Answer every question
1.	Fill in your employmen information.	t	Debtor 1	Debtor 2 or non-filing spouse
	If you have more than or		■ Employed	■ Employed
	attach a separate page vinformation about addition	with	☐ Not employed	☐ Not employed
	employers.	Occupation	Operator	Registered Nurse
	Include part-time, seaso self-employed work.	nal, or Employer's name	Eastman Chemical Resins, Inc.	Jefferson Regional Medical Center
	Occupation may include or homemaker, if it appli	• •	2200 PA-837 West Elizabeth, PA 15088	565 Coal Valley Road Clairton, PA 15025

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

3 years

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 7,122.57 \$ 4,990.74

3. +\$ 0.00 +\$ 0.00

4. \$ 7,122.57 \$ 4,990.74

For Debtor 1

3.5 years

For Debtor 2 or

Official Form 106I Schedule I: Your Income page 1

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 26 of 55

	tor 1 tor 2	Joshua L. Sutherland Sarah M. Sutherland		C	Case	number (if known)	19	-22799		
						Debtor 1		or Debtor on-filing s	pouse	
	Сор	y line 4 here	4.		\$_	7,122.57	\$	4	990.74	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$	1,820.98	\$	1,	072.57	
	5b.	Mandatory contributions for retirement plans	5b).	\$_	641.03	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$_	0.00	\$		399.23	
	5d.	Required repayments of retirement fund loans	5d		\$_	183.67	\$		0.00	
	5e.	Insurance	5e		\$_	109.81	\$		366.32	
	5f.	Domestic support obligations	5f.		\$_	0.00	\$		0.00	
	5g. 5h.	Union dues Other deductions. Specify: Parking	5g. 5h.		\$_ \$	104.02	+ \$		0.00	
	JII.	Eastlife	_ 311	i. T	\$ -	0.00 22.58	+ \$		21.67 0.00	
6	۸۵۵		_ 		*- \$					
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		· —	2,882.09	\$		859.79	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,240.48	\$	3	130.95	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	L	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		0.00	
	8d.	Unemployment compensation	8d	l.	\$	0.00	\$		0.00	
	8e.	Social Security	8e	.	$\$^-$	0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		0.00	
	8g.	Pension or retirement income	_ 8g		<u>\$</u> -	0.00	\$		0.00	
	8h.	Other monthly income. Specify:	8h		\$		+ \$		0.00	
9.	Δdd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8q+8h.	- 9.	9		0.00	\$		0.00	1
٠.			٠.	Ľ	_	0.00	Ľ		0.00	1
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		4,240.48 + \$		3,130.95	= \$	7,371.43
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe			•		n <i>Schedul</i> e	<i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies								7,371.43
13.	Do y ■	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?						Combin monthly	ed income

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:						
Deb	tor 1	Joshua L. Sı	utherland	d			ck if this is:		
	otor 2 ouse, if filing)	Sarah M. Su	therland			☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date:			
Unit	ed States Bank	ruptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA	-	MM / DD / YYYY		
Cas	e number 19	9-22799							
(If ki	nown)								
Of	fficial Fo	rm 106J							
		J: Your	Exner	1989				12/1	
Be	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar	e filing together, be form. On the top of	oth are equal f any addition	ally responsible fo onal pages, write y	or supplying correct	
Par		ribe Your House	hold						
1.	Is this a joir								
		es Debtor 2 live	in a separ	ate household?					
	■ N		•						
			st file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	tor 2.		
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?	
	Do not state dependents				Son		4	□ No ■ Yes	
								□ No	
					Daughter		<u> 7</u>	■ Yes □ No	
					Daughter		10	■ Yes	
								□ No	
3.	Do vour exi	penses include	_	No				☐ Yes	
	expenses of	of people other to d your depende	han _	Yes					
exp	imate your ex	a date after the l	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance i cluded it on Schedule I:)			Your exp	enses	
4.		or home owners		nses for your residence. In or lot.	nclude first mortgage	e 4. \$	·	0.00	
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a. \$;	0.00	
	4b. Prope	erty, homeowner's				4b. \$		0.00	
		e maintenance, re eowner's associat		upkeep expenses		4c. \$ 4d. \$		100.00	
5.				oominium dues our residence, such as ho	me equity loans	4a. \$ 5. \$		10.00 0.00	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 28 of 55

	btor 1 Joshua L. Sutherland btor 2 Sarah M. Sutherland	Case number (if known)	19-22799
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	190.00
	6b. Water, sewer, garbage collection	6b. \$	95.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	461.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	1,000.00
8.	Childcare and children's education costs	8. \$	175.00
9.	Clothing, laundry, and dry cleaning	9. \$	250.00
10.	Personal care products and services	10. \$	100.00
11.	Medical and dental expenses	11. \$	150.00
12.	Transportation. Include gas, maintenance, bus or train fare.		275.00
40	Do not include car payments.	12. \$	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	250.00
	Charitable contributions and religious donations	14. \$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 2	0	
	15a. Life insurance	o. 15a. \$	0.00
	15b. Health insurance	15a. \$	0.00
	15c. Vehicle insurance	15c. \$	200.00
	15d. Other insurance. Specify:	15d. \$	0.00
16	Taxes. Do not include taxes deducted from your pay or included in lines 4	·	0.00
	Specify:	16. \$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a. \$	0.00
		17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:17d. Other. Specify:	17d. \$	0.00
10	Your payments of alimony, maintenance, and support that you did not	·	0.00
10.	deducted from your pay on line 5, Schedule I, Your Income (Official Fo		0.00
19.			0.00
	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form	or on Schedule I: Your Income.	
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.	Other: Specify: Pet Costs	21. +\$	120.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	3,376.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official For	n 106J-2 \$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,376.00
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	7,371.43
	23b. Copy your monthly expenses from line 22c above.	23b\$	3,376.00
	23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	3,995.43
24.			rease or decrease because of a

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 29 of 55

Fill in this infor	mation to identify you	ır case:			
Debtor 1	Joshua L. Suth	erland			
	First Name	Middle Name	Last Name		
Debtor 2	Sarah M. Suthe				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	19-22799				
(if known)					Check if this is an
					amended filing
			onsible for supplying corr		12/15
obtaining mone		in connection with a bar		. Making a false statement, cond n fines up to \$250,000, or impris	
Sig	ın Below				
Did you pa	ay or agree to pay son	neone who is NOT an atto	orney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petit Declaration, and Signat	
				Deciaration, and Signat	ure (Oniciai Fonni 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Sarah M. Sutherland

Sarah M. Sutherland

Date August 8, 2019

Signature of Debtor 2

X /s/ Joshua L. Sutherland

Joshua L. Sutherland

Date August 8, 2019

Signature of Debtor 1

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 30 of 55

HI	in this inform	nation to identify you	r c250.				
	btor 1						
Dei	וטוטו ו	Joshua L. Suthe	Middle Name		Last Name		
Del	btor 2	Sarah M. Suther	land				
(Spo	ouse if, filing)	First Name	Middle Name		Last Name		
Uni	ited States Ba	nkruptcy Court for the:	WESTERN DISTRICT	OF PENI	NSYLVANIA		
Ca	se number '	19-22799					
(if kr	nown)						☐ Check if this is an amended filing
	ficial Fo		Affaire for Indiv	idual	c Filing for P	ankruntav	444
			Affairs for Indiv				4/1
			ible. If two married people , attach a separate sheet t				
nun	nber (if know	n). Answer every que	stion.				•
Pai	rt 1: Give D	Details About Your Ma	arital Status and Where Y	ou Lived	Before		
1.	What is you	r current marital state	us?				
••	What is you	ourrent maritar state					
	■ Married □ Not mai						
2.	During the I	ast 3 years, have you	lived anywhere other tha	n where	you live now?		
	□ N-						
	□ No ■ Ves Lie	et all of the places you	lived in the last 3 years. Do	not inclu	ide where you live now	,	
	— 103. Lis	st all of the places you	iived iii tile last 5 years. Do	TIOT IIICIO	de where you live now	•	
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
		ant Hills Blvd. n, PA 15236	From-To: February 20 June 2019	19 -	☐ Same as Debtor 139 Lake Drive Elizabeth, PA 1		☐ Same as Debtor 1 From-To:
3. stat			ver live with a spouse or I alifornia, Idaho, Louisiana, N				erritory? (Community property and Wisconsin.)
	■ No						
	☐ Yes. Ma	ake sure you fill out <i>Sc</i>	hedule H: Your Codebtors ((Official F	orm 106H).		
Pai	rt 2 Explai	in the Sources of You	ır Income				
	•						
4.	Fill in the tota	al amount of income yo	mployment or from operation received from all jobs and have income that you rece	d all busi	nesses, including part	time activities.	s calendar years?
	□ No						
	Yes. Fil	I in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(be	oss income fore deductions and lusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 31 of 55

Debtor 1 Joshua L. Sutherland
Debtor 2 Sarah M. Sutherland Case number (if known)

19-22799

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$53,324.42	■ Wages, commissions, bonuses, tips	\$29,447.39	
	☐ Operating a business		☐ Operating a business		
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$70,391.00	■ Wages, commissions, bonuses, tips	\$48,414.00	
	☐ Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$58,477.00	■ Wages, commissions, bonuses, tips	\$48,621.00	
	☐ Operating a business		☐ Operating a business		

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1		Debtor 2				
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)			

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either Debto	or 1's or Debto	r 2's debts primarily	consumer debts?
----	------------------	-----------------	-----------------------	-----------------

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Case 19-22799-CMB Document Page 32 of 55

	btor 1 btor 2	Joshua L. Sutherland Sarah M. Sutherland	Document 1	Cas	se number (if know	n) 19-22799	
7.	<i>Inside</i> of wh	in 1 year before you filed for bankruptoers include your relatives; any general particle you are an officer, director, person in iness you operate as a sole proprietor. 1 you.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which g securities; and	you are a gener any managing	al partner; corporations agent, including one for
	_	No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	insid	in 1 year before you filed for bankruptoer? de payments on debts guaranteed or cosi		ments or transfer a	any property on	account of a d	lebt that benefited an
		No Yes. List all payments to an insider					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name
Pai	rt 4:	Identify Legal Actions, Repossession	s and Foreclosures				
	modif	Il such matters, including personal injury fications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	s, divorces, collectio	on suits, paternity	actions, suppo	rt or custody
		e title e number	Nature of the case	Court or agency		Status of the	he case
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, go Check all that apply and fill in the details below. No. Go to line 11.		foreclosed, garı	nished, attache	d, seized, or levied?		
		Yes. Fill in the information below.	Describe the Property		Dat	e	Value of the
	0.00		Explain what happened				property
11.	acco	in 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.	etcy, did any creditor, incl		nancial instituti	on, set off any	amounts from your
	Cred	ditor Name and Address	Describe the action the	creditor took	Dar tak	e action was	Amount
12.		in 1 year before you filed for bankruptc t-appointed receiver, a custodian, or a		rty in the possess	ion of an assig	nee for the ben	efit of creditors, a
		No Yes					
Pai	rt 5:	List Certain Gifts and Contributions					
	Withi	in 2 years before you filed for bankrupt	tcy, did you give any gifts	with a total value	of more than \$	600 per person	?
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$600 person	Describe the gifts			es you gave gifts	Value
		son to Whom You Gave the Gift and ress:					

Deb	otor 2 Sarah M. Sutherland			Case number (if known) 19-22/99	
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co			ns with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	you lose anyth	ning because of the	t, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and	Descri	be any insurance coverage for the lo	oss	Date of your	Value of property
			the amount that insurance has paid. Lee claims on line 33 of Schedule A/B:		loss	lost
Par	t 7: List Certain Payments or Transfers					
	Include any attorneys, bankruptcy petition pr ☐ No ☐ Yes. Fill in the details. Person Who Was Paid Address Email or website address	ерагел	Description and value of any prop		Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not Yo	ou			maue	
	The Debt Doctors, LLC 607 College Street, Suite 101 Pittsburgh, PA 15232 mmh@thedebtdoctors.com		Attorney Fees		05/26/19	\$1,000.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your creding Do not include any payment or transfer that you have a not include any payment or trans	itors o	to make payments to your creditor		r transfer any prope	rty to anyone who
	Person Who Was Paid		Description and value of any prop	ortv	Date payment	Amount of
	Address		transferred	erty	or transfer was made	payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre	busin made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred	payments	iny property or received or debts	Date transfer was made
	Person's relationship to you			paid in exc	change	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 34 of 55

19-22799

Debtor 1 Joshua L. Sutherland
Debtor 2 Sarah M. Sutherland Case number (if known)

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No		y property to a	a self-settle	ed trust or similar device o	of which you are a		
	Yes. Fill in the details. Name of trust	Description and v	alue of the pro	operty tran	sferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and S	Storage Uni	ts			
20.	Within 1 year before you filed for bankruptcy,	, were any financial ac	counts or inst	ruments he	eld in your name, or for yo	our benefit, closed,		
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No Yes. Fill in the details.				it; shares in banks, credit	unions, brokerage		
		Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, a	any safe de	posit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
Par	9: Identify Property You Hold or Control for	or Someone Else						
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ıde any prope	rty you bor	rowed from, are storing fo	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Par	t 10: Give Details About Environmental Infor	mation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	e air, land, soil, surface	water, groun	• .	•			
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	as defined under any e		law, wheth	ner you now own, operate	, or utilize it or used		
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					substance,			

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 35 of 55

Debtor 1 **Joshua L. Sutherland** Debtor 2 **Sarah M. Sutherland**

Case number (if known) 19-22799

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit o	f any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation							
	■ No. None of the above applies. Go to	Part 12.							
	_	II in the details below for each business	3.						
	Business Name	Describe the nature of the business	Employer Identification numbe						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.					
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Mair Document Page 36 of 55

Joshua L. Sutherland Case number (if known) 19-22799 Debtor 2 Sarah M. Sutherland Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joshua L. Sutherland /s/ Sarah M. Sutherland Joshua L. Sutherland Sarah M. Sutherland Signature of Debtor 1 Signature of Debtor 2 Date August 8, 2019 Date August 8, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:				
Debtor 1	Joshua L. Sutherland	<u> </u>		
Debtor 2 (Spouse, if filing)	Sarah M. Sutherland			
United States B	Western District of Pennsylvania			
Case number (if known)	19-22799			

Check	Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					
☐ Check if this is an amended filing						

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 7,616.40 4,907.90 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 vou listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 38 of 55

Debtor 1 Debtor 2				Case number (if known)	19-22799)	_
				Column A Debtor 1		Column B Debtor 2 o	or	
7 Ir	nterest, dividends, and royalties			\$	0.00	\$	0.00	
	Inemployment compensation			\$	0.00	\$	0.00	
D	to not enter the amount if you contend the Social Security Act. Instead, list it her		s a benefit unde	r		·		
	For you	\$	0.00					
	For your spouse		0.00					
	Pension or retirement income. Do not enefit under the Social Security Act.		d that was a	\$	0.00	\$	0.00	
D re d	ncome from all other sources not liste to not include any benefits received und eceived as a victim of a war crime, a crir omestic terrorism. If necessary, list othe otal below.	er the Social Security Act on the against humanity, or into	r payments ernational or	\$	0.00	\$	0.00	
				Φ		· 		
	Tatal annuals for an annuals and	9		\$	0.00	\$	0.00	
	Total amounts from separate pa	ges, if any.	+	. \$	0.00	\$	0.00	
	calculate your total average monthly i ach column. Then add the total for Colu			7,616.40	+ \$	4,907.90	Total average monthly income	
12. C	copy your total average monthly incom	me from line 11.					\$12,524.30	 <u> </u>
13. C	Calculate the marital adjustment. Check							
	_							
-	You are married and your spouse is	• •	DW.					
	You are married and your spouse is Fill in the amount of the income liste dependents, such as payment of the Below, specify the basis for excludir	ed in line 11, Column B, that e spouse's tax liability or the	e spouse's suppo	ort of someone	other tha	ın you or you	ur dependents.	
	adjustments on a separate page.	0					,,	
	If this adjustment does not apply, er	nter 0 below.						
			\$_		-			
			^Ψ +\$		-			
			_					
	Total		\$	0.00	Cop	y here=>	0.	00
14.	Your current monthly income. Subtra	act line 13 from line 12.					\$12,524.30)
15.	Calculate your current monthly incor	ne for the year. Follow the	ese steps:					
	15a. Copy line 14 here=>						\$12,524.30)
	Multiply line 15a by 12 (the numb						x 12	
	15b. The result is your current monthly	income for the year for this	s part of the form)			\$150,291.60	_

Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Case 19-22799-CMB Page 39 of 55 Document

Debt Debt		Sarah M. Sutherland		Case number (if known)	19-22799
16	. Cal	culate the median family income that applies to y	ou. Follow these	e steps:	
	16a	. Fill in the state in which you live.	PA		
	16h	. Fill in the number of people in your household.	5		
		Fill in the median family income for your state and s		 1 .	_{\$} 109,078.00
		To find a list of applicable median income amounts, instructions for this form. This list may also be available.	go online using	the link specified in the separate	Ψ
17		v do the lines compare?			
	17a	11 U.S.C. § 1325(b)(3). Go to Part 3. Do No	OT fill out Calcu	lation of Your Disposable Income (C	Official Form 122C-2).
	17b	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 ab	lation of Your D		
Par	t 3:	Calculate Your Commitment Period Under 11 L	J.S.C. § 1325(b)	(4)	
18.	Cop	by your total average monthly income from line 11	I.		\$\$
19.	con	luct the marital adjustment if it applies. If you are tend that calculating the commitment period under 11 use's income, copy the amount from line 13.	married, your sp U.S.C. § 1325(ouse is not filing with you, and you b)(4) allows you to deduct part of you	our
		. If the marital adjustment does not apply, fill in 0 on I	ine 19a.		-\$0.00
		. Subtract line 19a from line 18.			\$12,524.30_
20.	Cal	culate your current monthly income for the year.		•	42 524 20
	20a	. Copy line 19b			\$12,524.30_
		Multiply by 12 (the number of months in a year).			x 12
	20b	. The result is your current monthly income for the ye	ear for this part o	f the form	\$150,291.60_
	20c	. Copy the median family income for your state and s	size of household	d from line 16c	\$109,078.00_
	21.	How do the lines compare?			
		☐ Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the	e court, on the top of page 1 of this f	orm, check box 3, The commitment
		Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	ess otherwise o	rdered by the court, on the top of pa	ge 1 of this form, check box 4, The
Par	t 4:	Sign Below			
	-	signing here, under penalty of perjury I declare that the	ne information or		ents is true and correct.
)		/ Joshua L. Sutherland oshua L. Sutherland		X /s/ Sarah M. Sutherland Sarah M. Sutherland	
		gnature of Debtor 1		Signature of Debtor 2	
		## August 8, 2019 MM / DD / YYYY		Date August 8, 2019 MM / DD / YYYY	
	If yo	ou checked 17a, do NOT fill out or file Form 122C-2.			
	If yo	ou checked 17b, fill out Form 122C-2 and file it with the	nis form. On line	39 of that form, copy your current m	nonthly income from line 14 above.

Joshua L. Sutherland

Debtor 1

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 40 of 55

Fill in this	information to identify your case:	
Debtor 1	Joshua L. Sutherland	
Debtor 2 (Spouse, if	Sarah M. Sutherland filing)	
United Stat	tes Bankruptcy Court for the: Western District of Pennsylvania	
Case numb (if known)	per 19-22799	☐ Check if this is an amended filing
Official For	m 122C-2 er 13 Calculation of Your Disposable II	ncome 04/1
	his form, you will need your completed copy of Chapter 13 Statement Period (Official Form 122C-1).	ent of Your Current Monthly Income and Calculation of
	beded, attach a separate sheet to this form, Include the line number pages, write your name and case number (if known). Calculate Your Deductions from Your Income	to which additional information applies. On the top any
the ques	ernal Revenue Service (IRS) issues National and Local Standards fo stions in lines 6-15. To find the IRS standards, go online using the tion may also be available at the bankruptcy clerk's office.	
expense	the expense amounts set out in lines 6-15 regardless of your actual expense if they are higher than the standards. Do not include any operating expand do not deduct any amounts that you subtracted from your spouse's	penses that you subtracted from income in lines 5 and 6 of Form
If your ex	xpenses differ from month to month, enter the average expense.	
Note: Lir	ne numbers 1-4 are not used in this form. These numbers apply to inform	nation required by a similar form used in chapter 7 cases.
5. Th	e number of people used in determining your deductions from inco	me
plus	in the number of people who could be claimed as exemptions on your for s the number of any additional dependents whom you support. This nun number of people in your household.	

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 2,206.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 41 of 55

Joshua L. Sutherland Debtor 1 Sarah M. Sutherland 19-22799 Case number (if known) Debtor 2 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 5 7c. Subtotal. Multiply line 7a by line 7b. 275.00 Copy here=> \$ 275.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 275.00 7g. **Total.** Add line 7c and line 7f 275.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 710.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,214.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Cenlar 2,849.18 **Jefferson Hills School District & Boroug** 188.25 Copy Repeat this amount 3,037.43 3,037.43 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Сору Subtract line 9b (total average monthly payment) from line 9a (mortgage 0.00 0.00 here=> or rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Case 19-22799-CMB Page 42 of 55 Document

Debtor 1 Debtor 2	Sarah M. Sutherland		Case number (if known)	19-22799	
11.	Local transportation expenses: Check the number of	vehicles for which you claim	n an ownership or ope	erating expense.	
	□ 0. Go to line 14.				
	☐ 1. Go to line 12.				
	2 or more. Go to line 12.				
12	Vehicle operation expense: Using the IRS Local Stand	dards and the number of vel	hicles for which you c	laim the	
12.	operating expenses, fill in the <i>Operating Costs</i> that apply				474.00
13.	Vehicle ownership or lease expense: Using the IRS L You may not claim the expense if you do not make any more than two vehicles.				
Vel	hicle 1 Describe Vehicle 1:				
120	Oursership or lessing costs using IDS Less Standard		¢ 500		
	Ownership or leasing costs using IRS Local Standard		\$508	.00	
130.	Average monthly payment for all debts secured by Vehic Do not include costs for leased vehicles.	cie i.			
	To calculate the average monthly payment here and on are contractually due to each secured creditor in the 60 bankruptcy. Then divide by 60.		at		
	Name of each creditor for Vehicle 1	Average monthly payment			
	-NONE-	\$			
13c.	Total Average Monthly Payme Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less that			0.00 Repeat this amount on line 33b. Copy net Vehicle 1 expense here	
			\$508	=> \$	508.00
	hicle 2 Describe Vehicle 2: Ownership or leasing costs using IRS Local Standard				
	Average monthly payment for all debts secured by Vehiclessed vehicles.			.00	
	Name of each creditor for Vehicle 2	Average monthly payment			
	-NONE-	\$			
	Total average monthly paymen	\$ 0.00	Copy here => -\$	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			Copy net	
	Subtract line 13e from line 13d. if this number is less that	n \$0, enter \$0	 \$ 508	Vehicle 2 expense here => \$	508.00
14.	Public transportation expense: If you claimed 0 vehi Public Transportation expense allowance regardless			s, fill in the	0.00
15.	Additional public transportation expense: If you clair also deduct a public transportation expense, you may fil not claim more than the IRS Local Standard for <i>Public 1</i>	I in what you believe is the a			0.00

Joshua L. Sutherland

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 43 of 55

Debtor 1 Debtor 2 Sarah M. Sutherland Case number (if known) 19-22799

Oth		In addition to the expense determined the following IRS categories		s listed above,	you are allowed your monthly expenses	s for	
16.	5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						2,881.96
17.	Involuntary deductions: T	he total monthly payroll dedu	uctions th	at your job rec	quires, such as retirement		
	contributions, union dues, a					\$	110.26
40		. , , ,	-	•	1(k) contributions or payroll savings.	Ψ_	
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						29.88
19.	• •	as spousal or child support	payment	S.	•	¢	0.00
					ou will list these obligations in line 35.	\$	0.00
20.	Education: The total month		ducation	that is either re	equired:		
	as a condition for your jo		- la il al id a		stica in available for circilar comican	\$	0.00
0.4					ation is available for similar services.	Ψ	
21.		y amount that you pay for cr any elementary or seconda	-	•	itting, daycare, nursery, and preschool.	\$	0.00
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.						0.00
	•	ice or health savings accoun		•		\$	0.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.						
					vice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.	24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.						
Add	itional Expense Deduction	s These are additional de Note: Do not include ar					
25.					ses. The monthly expenses for health y necessary for yourself, your spouse, or	or	
	Health insurance		\$	426.74			
	Disability insurance		\$	36.41			
	Health savings account	+	\$	0.00	1		
	Total		\$	463.15	Copy total here=>	\$	463.15
	Do you actually spend this t						
	Yes		\$				
26.	continue to pay for the rease your household or member	onable and necessary care a	and suppo o is unab	ort of an elderl le to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
		the nature of these expense				\$	0.00

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 44 of 55

Debtor 1 Debtor 2	Joshua L. Sutherland Sarah M. Sutherland	Cas	se number (if kno	_{wn)} 19	-22799		
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operati	ng exper	nses on		
	If you believe that you have home energy c 8, then fill in the excess amount of home en	osts that are more than the home energy cos ergy costs	sts included in	expens	es on line)	
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must ary.	show that the	addition	al	\$_	0.00
29.	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	ren who are younger than 18. The monthly pendent children who are younger than 18 ye	expenses (nears old to att	ot more end a pr	than ivate or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must on the otal ready accounted for in lines 6-23.	explain why t	he amou	nt		
	* Subject to adjustment on 4/01/22, and ever	ery 3 years after that for cases begun on or af	fter the date of	of adjustr	ment.	\$_	170.83
		ne monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.					
		ional allowance, go online using the link spec to be available at the bankruptcy clerk's office		eparate			
	You must show that the additional amount of	claimed is reasonable and necessary.				\$_	74.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	n the form of	cash or f	inancial		
	Do not include any amount more than 15% $$	of your gross monthly income.				\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.				\$_	707.98
	uctions for Debt Payment						
	·	in numeric that you are including home		مامنطمير			
	oans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages,	venicie			
	To calculate the total average monthly paymereditor in the 60 months after you file for bar	ent, add all amounts that are contractually du nkruptcy. Then divide by 60.	ie to each se	cured			
	Mortgages on your home					Avera paym	ige monthly
33a.	Copy line 9b here				=>	\$	3,037.43
	Loans on your first two vehicles					*	
33b.	0 1: 401.1				=>	\$	0.00
						Ψ	
33c.	Copy line 13e here				=>	Φ	0.00
33d.	List other secured debts:						
Nam	e of each creditor for other secured debt	Identify property that secures the debt	i	Does pay include to or insura	axes		
				□ No			
	-NONE-			□ Yes	i	¢	
		-				\$	
				□ No			
				□ Yes	;	\$	
				□ No			
				☐ Yes	+	\$	
33e	Total average monthly payment. Add lines	33a through 33d	\$3	,037.43	Copy total here=	Φ.	3,037.43

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 45 of 55

Joshua L. Sutherland Debtor 1 Sarah M. Sutherland 19-22799 Case number (if known) Debtor 2 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure amount** Monthly cure amount 412 Labrador Lane Clairton, PA 15025 **Allegheny County** Market value based on the 2017 **20.292.02** ÷ 60 = \$ 338.20 Cenlar purchase price $\div 60 = \$$ $\div 60 = +$$ Сору total 338.20 338.20 \$ Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 3,375.63 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 7,703.10 expense allowances Copy line 32, All of the additional expense deductions 707.98 Copy line 37, All of the deductions for debt payment 3,375.63 11,786.71 Total deductions..... 11,786.71 Copy total here=>

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 46 of 55

ebior i	Joshua L. Su Sarah M. Sutl			Ca	ase	number (if known)	19-2	22799	
art 2:	Determine Yo	our Disposable Income Under 11 U.S.C. § 13	25(b)(2)					
		rrent monthly income from line 14 of Form of Current Monthly Income and Calculation of			I.			\$	12,524.30
chil disa rece	dren. The mont bility payments eived in accorda	bly necessary income you receive for support hly average of any child support payments, fos for a dependent child, reported in Part I of Forn nce with applicable nonbankruptcy law to the expended for such child.	ter c n 12	are payments, or 2C-1, that you		\$	0.0	0	
emp in 1	oloyer withheld f	retirement deductions. The monthly total of a rom wages as contributions for qualified retirem b)(7) plus all required repayments of loans from C. § 362(b)(19).	nent	plans, as specified	d	\$1	I,115.4	9_	
42. Tot a	al of all deducti	ons allowed under 11 U.S.C. § 707(b)(2)(A).	Cop	y line 38 here=	=>	\$11	,786.7	<u>1</u>	
exp thei	enses and you h r expenses. You	cial circumstances. If special circumstances judice no reasonable alternative, describe the spunst give your case trustee a detailed expland documentation for the expenses.	eciá	l circumstances ai	nd				
Describ	e the special c	ircumstances		Amount of exp	en	se			
_				\$					
_				\$					
_				\$					
		Total	\$_	0.00		Copy here=>\$		0.00	
44. Tot a	al adjustments.	. Add lines 40 through 43.		=>	\$	12,902.		Copy nere=> - \$	12,902.20
45. Cal	culate your mo	nthly disposable income under § 1325(b)(2).	. Sub	otract line 44 from	lin	e 39.		\$	-377.90
rt 3:	Change in Inc	come or Expenses							
have time you	e changed or are your case will be filed your petition	or expenses. If the income in Form 122C-1 or e virtually certain to change after the date you to be open, fill in the information below. For examp on, check 122C-1 in the first column, enter line to il in when the increase occurred, and fill in the a	filed ple, i 2 in t	your bankruptcy p f the wages report the second columi	eti ted n, e	tion and during I increased after	g the er		
	Line	Reason for change		Date of change	е	Increase of decrease?	-	Amount of c	hange
Form									
□ 122C □ 122C	:-1 :-2					☐ Increas ☐ Decrea	se	\$	
□ 122C □ 122C □ 122C	:-1 :-2 :-1					Decrea	se e	-	
□ 122C □ 122C □ 122C □ 122C	:-1 :-2 :-1 :-2					Decrea Increas Decrea	se e se	\$ \$	
□ 122C □ 122C □ 122C □ 122C □ 122C	1 2 1 2					Decrea	se e se e	-	
Form 1220 1220 1220 1220 1220 1220 1220 12	-1 2 1 2 1 2					Decrea Increas Decrea Increas	se e se e se e	\$	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 47 of 55

Debtor 1 Debtor 2	Sarah M. Sutherland		Case number (if known)	19-22799
Part 4:	Sign Below			
E	By signing here, under penalty of perjury you de	clare that the information on	this statement and in any atta	achments is true and correct.
X	/s/ Joshua L. Sutherland		/ Sarah M. Sutherland	
	Joshua L. Sutherland		arah M. Sutherland	
	Signature of Debtor 1	Si	gnature of Debtor 2	
Date	August 8, 2019	Date A	ugust 8, 2019	
	MM / DD / YYYY	M	M / DD / YYYY	
			, = = ,	

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 48 of 55

Debtor 1 Debtor 2 Joshua L. Sutherland Sarah M. Sutherland

Case number (if known)

19-22799

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Eastman Chemical Resins, Inc.

Year-to-Date Income:

Total Year-to-Date Income: \$45,698.40 from check dated 6/30/2019.

Average Monthly Income: **\$7,616.40**.

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 49 of 55

Debtor 1 Joshua L. Sutherland
Debtor 2 Sarah M. Sutherland

Case number (if known)

19-22799

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Jefferson Regional Medical Center

Year-to-Date Income:

Total Year-to-Date Income: \$29,447.39 from check dated 6/30/2019 .

Average Monthly Income: **\$4,907.90**.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 51 of 55

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 54 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In	Joshua L. Sutherland re Sarah M. Sutherland		Case No.	19-22799
	Odran III. Oddinonana	Debtor(s)	Chapter	13
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of For legal services, I have agreed to accept	SATION OF ATTOI), I certify that I am the attorr of the petition in bankruptcy, or in connection with the ban	ney for the above name, or agreed to be paid alkruptcy case is as fol	ed debtor(s) and that to me, for services rendered or to
	Balance Due		\$	3,000.00
2.	\$310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspect	ts of the bankruptcy c	ase, including:
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	n may be required;	
7.	By agreement with the debtor(s), the above-disclosed fee of All provisions of the retainer agreement expands be billed at an hourly rate of \$300.00 billed at a 1/10th hour. The attorney's fees the retainer to be paid through your Chapt \$4,000.00. Should the hourly attorney's fees application for additional attorney's fees fulfilled the chapter 13 Plan in order to pay these	xecuted by counsel and for Attorney Herron, \$25 s will be billed first from ter 13 Plan up to the curres exceed \$4,000.00, Clied with the Court by Fire	debtor are incorpo 50.00 for Attorneys the above-request rently Court appro ent hereby agrees rm. Client also agi	Hanak and Buchanan, and ed intitial retainer as well as ved "no-look" fee of and consents to any rees to the modification of
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	August 8, 2019	/s/ Matthew M. He	erron	
	Date	Matthew M. Herro		
		Signature of Attorne The Debt Doctors	2	
		607 College Stree		
		Pittsburgh, PA 15	5232	
		412-395-6001 Fa		
		mmh@thedebtdo	octors.com	
		Name of law firm		

Case 19-22799-CMB Doc 16 Filed 08/08/19 Entered 08/08/19 13:52:08 Desc Main Document Page 55 of 55

United States Bankruptcy Court Western District of Pennsylvania

Joshua L. Sutherland Sarah M. Sutherland		Case No.	19-22799	
	Debtor(s)	Chapter	13	
		Sarah M. Sutherland	Sarah M. Sutherland Case No.	Sarah M. Sutherland Case No. 19-22799

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	August 8, 2019	/s/ Joshua L. Sutherland	
		Joshua L. Sutherland	
		Signature of Debtor	
Date:	August 8, 2019	/s/ Sarah M. Sutherland	
		Sarah M. Sutherland	
		Signature of Debtor	